FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURTIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

143	9007
OMB AP	PROVAL
OMB Number	3235-0076
Expires:	April 30, 2008
Estimated avera	ige burden
hours per respo	nse 16.00

SEC USE ONLY								
Prefix]	Serial						
DA ⁻	TE RECEIV	ED						

UNIFORM LIMITED OFFERING EXEMPTION	
Name of Offering Cassatt Fund, L.P. (☐ check if this is an amendment and name has changed, and indicate cha	inge.)
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ S	ection 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Cassatt Fund, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 400 Berwyn Park, Suite 115, 899 Cassatt Road, Berwyn, PA 19312	Telephone Number (Including Area Code) 610-854-1000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business: Securities Investment	
	PROCESSED
Type of Business Organization	(please specify) JUL 112008
	(please specify) JUL 112008
☐ business trust ☐ limited partnership, to be formed	THOMSON REUTERS
Actual or Estimated Date of Incorporation or Organization: Month Year 2006	☐ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation fo	r State.
CN for Canada; FN for other foreign jurisdiction)	PA
CENEDAL INCEDICATIONS	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under seq. or 15 U.S.C. 77d(6).	(5) 17 CFR 230.501 et
When To File: A notice must be filed no later than 15 days after the first sale of securities in Securities and Exchange Commission (SEC) on the earlier of the date it is received by the S address after the date on which it is due, on the date it was mailed by United States registered	vith the U.S. eived at that
Where to File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washingto	08054637
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must signed must be photocopies of the manually signed copy or bear typed or printed signatures.	be manually signed, not manually
Information Required: A new filing must contain all information requested. Amendments need or any changes thereto, the information requested in Part C, and any material changes from the information Part E and the Appendix need not be filed with the SEC.	
Filing Fee. There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (UI have adopted ULOE and that have adopted this form, Issuers relying on ULOE must file a separate no state where sales are to be, or have been made. If a state requires the payment of a fee as a precon	otice with the Securities Administrator in each

- ATTENTION -

the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

to the notice constitutes a part of this notice and must be completed.

SEC 1972 (6-02)

A. BASIC IDENTIFICATION DATA										
2. Enter the information requested for the following:										
 Each promoter of the issuer, if the issuer has been organized within the past five years; 										
 Each beneficial owner securities of the issuer; 		wer to vote or dispose, o	or direct the vote or dispos	iti6n of, 10% or r	nore of a class of equity					
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
Each general and mana	aging partner o	f partnership issuers.								
	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if it Cassatt Fund Partners, LLC	individual)									
	Business or Residence Address (Number and Street, City, State, Zip Code) 400 Berwyn Park, Suite 115, 899 Cassatt Road, Berwyn, PA 19312									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if i Mark Carrow	individual)									
Business or Residence Address 400 Berwyn Park, Suite 115, 89	•		ode)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if i George Heckler	individual)									
Business or Residence Address 400 Berwyn Park, Suite 115, 89			ode)							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)									
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last name first, if	individual)									
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)		100							
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, if	individual)									
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)							

B. INFORMATION ABOUT OFFERING										
I. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										
Answer also in Appendix, Column 2, if filing under ULOE.										
2. What is the minimum investment that will be accepted from any individual?										
3. Does the offering permit joint ownership of a single unit?										
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and / or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.										
Full Name (Last name first, if individual) NONE										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Name of Associated Broker or Dealer										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers										
(Check "All States" or check individual States)										
AL AK AZ AR CA CO CT DE DC FL GA HI ID										
IL IN IA KS KY LA ME MD MA MI MN MS MO										
MT NE NV NH NJ NM NY NC ND OH OK OR PA										
RI SC SD TN TX UT VT VA WA WV WI WY PR										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Name of Associated Broker or Dealer										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers										
(Check "All States" or check individual States)										
AL AK AZ AR CA CO CT DE DC FL GA HI ID										
IL IN IA KS KY LA ME MD MA MI MN MS MO										
MT NE NV NH NJ NM NY NC ND OH OK OR PA										
RI SC SD TN TX UT VT VA WA WV WI WY PR										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Name of Associated Broker or Dealer										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers										
(Check "All States" or check individual States)										
AL AK AZ AR CA CO CT DE DC FL GA HI ID										
IL IN IA KS KY LA ME MD MA MI MN MS MO										
MT NE NV NH NJ NM NY NC ND OH OK OR PA										

 Enter the aggregate offering price of securities included in this offering and the total an sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offeri- box and indicate in the columns below the amounts of the securities offered for exchange exchanged. 	ing, check this			
Type of Security		Aggregate Offering Price	.Am	ount Aiready Sold
Debt		\$	\$	
Equity	_	\$	<u></u>	
☐ Common ☐ Preferred	_			
Convertible Securities (including warrants)		\$	\$	
Partnership Interests	_	\$ 50,000,000	\$	17,000,000
Other (Specify)		\$	\$	
Total		\$ 50,000,000	<u> </u>	17,000,000
Answer also in appendix, Column 3, if filing under ULOE.	_			
2. Enter the number of accredited and non-accredited investors who have purchased sec offering and the aggregate dollar amounts of their purchases. For offerings under Rule the number of persons who have purchased securities and the aggregate dollar ampurchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	e 504, indicate nount of their	Number Investors	Do	Aggregate Illar Amount f Purchases 17,000,000
	-			
Non-accredited Investors	-	0	\$	0 00
Total (for filings under Rule 504 only)		0	3	0.00
Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mon first sale of securities in this offering. Classify securities by type listed in Part C - Que	oths prior to the estion 1.	Type of	Do	ollar Amount
Type of offering		Security		Sold
Rule 505	-	0		0
Regulation A	_	0		0
Rule 504		0	\$	0
Total	_	0		0.00
4. a. Fumish a statement of all expenses in connection with the issuance and distrisecurities in this offering. Exclude amounts relating solely to organization expenses. The information may be given as subject to future contingencies. If the amount of a is not known, furnish an estimate and check the box to the left of the estimate.	of the issuer.			
Transfer Agent's Fee			_\$_	
Printing and Engraving Costs			_\$	
Legal Fees		\boxtimes		17,000
Accounting Fees		\boxtimes	\$	5,000
Engineering Fees			5	
Sales commissions (specify finders' fees separately)			\$	
Other Expenses (identify)		. п	\$	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 \boxtimes

\$

22,000

	C. OFFERING PRICE, NUM	IBER OF INVESTORS, EXPENSES AND L	JSE	OF PR	COCEED	<u>s</u>		
	b. Enter the difference between the aggregate Question 1 and total expenses furnished in responshe "adjusted gross proceeds to the issuer."	ase to Part C - Question 4.a. This difference	e is			-	\$	49,978,000
5.	Indicate below the amount of the adjusted gross prifor each of the purposes shown. If the amount for and check the box to the left of the estimate. It adjusted gross proceeds to the issuer set forth in re-							
	and some process of the source	Question in the second		Off Direc	ients to icers, tors, & iliates		Pa	yments To Others
	Salaries and fees		ο.	\$		□.	\$	
	Purchase of real estate		□.	\$			\$	
	Purchase, rental or leasing and installation of ma	chinery and equipment	□.	\$			\$	
	Construction or leasing of plant buildings and fac	cilities	□.	\$		□.	\$	
	Acquisition of other businesses (including the val offering that may be used in exchange for the ass pursuant to a merger)	sets or securities of another issuer		\$			\$	
	Repayment of indebtedness							
	Working capital					_		49,978,000
	Other (specify):			s		_	\$	
							•	
	· · · · · · · · · · · · · · · · · · ·							
	Column Totals		□.	\$	0.00	. ₩.	\$	49,978,000
	Total Payments Listed (column totals added)			į	⊠ \$	4	49,9	78,000
		D. FEDERAL SIGNATURE						
fo	ne issuer has duly caused this notice to be signed flowing signature constitutes an undertaking by the its staff, the information furnished by the issuer to	issuer to furnish to the U.S. Securities and Ex	ccha	nge Co	mmission	, upo	er R n wi	ule 505, the itten request
ls	suer (Print or Type)	Signature)	•	I	Date			
Ca	assatt Fund, L.P.	Marh S. Caum)4/18/200	8		
Na	ame of Signer (Print or Type)	Title of Signer (Print or Type)						
M	ark Carrow	l Par	tners, L	LC				

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE 1. Is any party described in 17 CFR 230,262 presently subject to any of the disqualification provisions Of such rule? D

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person:

Issuer (Print or Type) Cassatt Fund, L.P.	Signature Marhs. Carm	Date 04/18/2008			
Name of Signer (Print or Type) Mark Carrow	Title of Signer (Print or Type) Member of the General Partner, Cassatt Fund Partners	, LLC			
Mark Carrow	Member of the General Partner, Cassatt Fund Partners, LLC				

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2 3			4 5 Disqualification					
	to non-ac	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in State (Part C-Item1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
co		X	LP Interests - \$50,000,000	2	\$11,000,000	0	0		Х
СТ									
DE									
DC									1
FL								4 5 1	
GA									
н				1					
ID									
IL	<u> </u>								
IN									
IA							`		
KS	<u> </u>				-				· ·
KY									
LA	<u> </u>			-					
ME									
MD		1							
MA					 			 	
MI									
MN					-			 	
MS									
MO				<u></u>					

1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in State (Part C-Item1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE									
NV									
NH									
NJ_					<u> </u>				
NM									
NY									
NC		<u> </u>							
ND									
ОН									
ок	1.								
OR			IDL	1	\$6,000,000	0	0	0	x
<u>PA</u>		Х	LP Interest- \$50,000,000	2	30,000,000	0			^
RI									
sc			ļ						
SD									
TN			ļ						
TX									
UT						-			
VT									
VA									
WA		ļ							
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